

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

## **MAIL STOP AMENDMENT**

In re Patent Application of

Hervé RICHARD

Application No.: 10/829,440

Filing Date:

Sir:

April 22, 2004

Group Art Unit: 1624

Examiner: VENKATARAMAN BALASUBRAMAN

Confirmation No.: 6323

Title: PHOTOPROTECTIVE COSMETIC COMPOSITIONS COMPRISING

PARA-AMINOBENZALMALONATE-SUBSTITUTED s-TRIAZINE COMPOUNDS

## AMENDMENT/REPLY TRANSMITTAL LETTER

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Encl	osed is a reply for the above-identified patent application.							
☐ A Petition for Extension of Time is also enclosed.								
	Terminal Disclaimer(s) and the \$65.00 (2814) \$130.00 (1814) fee per Disclaimer due under 37 C.F.R. § 1.20(d) are also enclosed.							
X	Also enclosed is/are a Second Information Disclosure Statement, Form PTO-1449 and copies of two references cited, together with French Search Report and English translation thereof							
.,								
	Small entity status is hereby claimed.							
	Applicant(\$) requests continued examination under 37 C.F.R. § 1.114 and enclose the \$395.00 (2801) ■ \$790.00 (1801) fee due under 37 C.F.R. § 1.17(e).							
	Applicant(s) requests that any previously unentered after final amendments <u>not</u> be entered. Continued examination is requested based on the enclosed documents identified above.							
	Applicant(s) previously submitted							
	on,							
	for which continued examination is requested.							
	Applicant(s) requests suspension of action by the Office until at least, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.							
	A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) (1809/2809) is also enclosed.							

Attorney Docket No	016800-632		
Application No.	10/829.440		

	No	additional	claim	fee is	require
_	140	additional	Gaiiii	100 13	require

An additional claim fee is required, and is calculated as shown below.

		Al	MENDE	ED CLAIMS				
	No. of Claims	Highes of Cla Previo Paid	aims ously	Extra Claims		Ra	te	Additional Fee
Total Claims	23	MINUS	22 =	1	x	\$50.00	(1202) =	\$ 50.00
Independent Claims	1	MINUS	3 =	0	x	\$200.00	(1201) =	\$ 0.00
If Amendment adds n	nultiple depen	dent claim	s, add \$	360.00 (1203)				
Total Claim Amendment Fee						\$ 50.00		
Small Entity Status claimed - subtract 50% of Total Claim Amendment Fee \$						\$ 0.00		
TOTAL ADDITIONAL CLAIM FEE DUE FOR THIS AMENDMENT						\$ 50.00		

X	A check in the amount of	of \$50.00	is enclosed for the fee due.
	Charge	to Deposit Acc	ount No. 02-4800.
	Charge	to credit card.	Form PTO-2038 is attached.

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

**BUCHANAN INGERSOLL PC** 

P.O. Box 1404 Alexandria, Virginia 22313-1404 (703) 836-6620

Date: October 28, 2005

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Mary Katherine Baumeister Registration No. 26,254